PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P. O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (\$71-273-288\$

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22913	7590 11/20	1/2009				mission	
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Salt Lake City, U	1 84111					(Depositor's name	
						(Signature)	
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APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/986,662 11/09/2001		Thomas Dean Robbins			17535.1.1	6050	
TITLE OF INVENTION:				·	L TOTAL TITLE NAME	DATE DUE	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE			
nonprovisional	YES	\$755	\$300	\$0	\$1055	02/22/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS]			
LONSBERRY, HUNTER B		2421	725-058000				
1. Change of correspondence address or indication of "Fee Address" (37 CER 1.853). Change of correspondence address for Change of Correspondence Address from PTOSB/123) altached. Change of Correspondence Address from PTOSB/123) altached. Cardinal from PTOSB/143 altached. Use of a Customer PTOSB/143 altached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys cagents OR, Alternatively, (2) the name of a single firm (flaving as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 1818cd, no name will be printed.				
(A) NAME OF ASSIGN	ss an assignee is ident in 37 CFR 3.11. Comp NEE	ified below, no assignee detion of this form is NO	data will appear on the part a substitute for filing an an (B) RESIDENCE: (CITY	atent. If an assigne assignment. and STATE OR CO	,		
Please check the appropriat	te assignee category or	categories (will not be pr	rinted on the patent):	Individual Co	rporation or other private gro	oup entity Government	
4a. The following fee(s) are submitted: 2 Issue Fee			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) \[\begin{align*} \text{D} \text{ Active its enclosed.} \\ \begin{align*} \text{D} \text{ Payment by recident card. Form PTO-2038 is attached.} \\ \begin{align*} \text{D} \text{FDirector is hereby subtorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 2 3-3-112. \(\text{d} \) (enclose an extra copy of this form). \(\text{D} \)				
5. Change in Entity Status			☑ b. Applicant is no long	ger claiming SMAL	L ENTITY status. See 37 C	FR 1.27(g)(2).	
NOTE: The Issue Fee and I interest as shown by the rec	Publication Fee (if requords of the United Sta	aired) will not be accepted tes Patent and Trademark	d from anyone other than the	he applicant; a regis	tered attorney or agent; or th	e assignee or other party in	
Authorized Signature	/Eric L. Maschoft			Date 2	19/10		
Typed or printed nameERIC L. MASCHOFF				Registration No			
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